

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | | | |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Final | Original | Date |
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| 36 | ✓ | | |
| 37 | ✓ | | |
| 38 | ✓ | | |
| 39 | ✓ | | |
| 40 | N | | |
| 41 | N | | |
| 42 | N | | |
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| Claim | Final | Original | Date |
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| 149 | | | |
| 150 | | | |

BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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